PTO/SB/17 (10-01-08) Revision (10/01/2008)

	Complete if Known
Effective on 10/01/2008 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	
# FEE TRANSMITTAL # FOR FY 2009	

Complete if Known	
Application Number	10/537,947
Filing Date	February 16, 2006
First Named Inventor	FRANGER, Sylvain
Examiner Name	Brittany M. Martinez
Art Unit	1793
Attorney Docket No.	10404.024.00

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	($) 988.00

METHOD OF PAYMENT (check all that apply)

☒ Check   ☐ Credit Card   ☐ Money Order   ☐ None   ☐ Other (please identify):_____

☒ Deposit Account   Deposit Account Number: 50-0911   Deposit Account Name: McKenna Long & Aldridge LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s)   ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee ($)	Small Entity Fee ($)	Fee ($)	Small Entity Fee ($)	Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	115	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)
19 - 20 or HP =	0 x	$52 =	0

HP = highest number of total claims paid for, if greater than 20.

Multiple Dependent Claims	
Fee ($)	Fee Paid ($)
0	0

Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)
0 - 3 or HP =	0 x	$220 =	0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is $270 ($135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

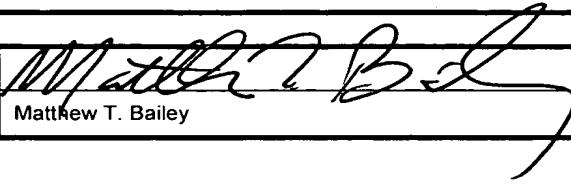| Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee($)	Fee Paid ($)
_____ - 100 =	0 / 50 =	0 (round up to a whole number) x	_____ =	0

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge): Excess Claim Fees (newly added claims)	$988.00
	_____
	_____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 33,829	Telephone (202) 496-7500
Name (Print/Type)	Matthew T. Bailey		Date March 31, 2009

DC:50611356.1